

**City of Alexandria Circuit Court
New CHANCERY Case Cover Sheet**

Date Filed: _____

Case Number: _____

COMPLAINANT LAST NAME	FIRST NAME
DEFENDANT LAST NAME	FIRST NAME

(SHOW ONLY FIRST COMPLAINANT AND FIRST DEFENDANT)

COMPLAINANT ATTORNEY: _____

Firm: _____

****ADDRESS REQUIRED FOR PRO SE FILERS****

Address: _____

Phone Number: _____ BAR ID: _____

PROCESS: ☐ Serve by Sheriff (Sheriff fee included with filing fee)

☐ Private Service. When ready, please call _____

☐ Acceptance and/or Waiver of Process Filed

☐ Through Statutory Agent. Separate fee, necessary affidavits and extra copies of process included.

☐ Acceptance Before Notary

☐ Accept and Waive Before Clerk

☐ Order of Publication. Separate fee for Newspaper included.

☐ Do Not Issue Process At This Time

☐ Other _____

CLERK'S USE: Amount Filing Fee Paid: _____

Number of Sheriff Services Paid: _____

☐ Check(s) for Statutory Agents

☐ Order & Affidavit to Waive Filing Fees

☐ Name change requested - Fee paid _____

☐ Vs-4 Form included ☐ Vs-21 Form included

☐ Attachments to Bill of Complaint

☐ Fee for Newspaper for Order of Publication

☐ Notice or Praecipe to Schedule- Date To Schedule: _____